



**Team Registration and Fee Deadline:** Friday, May 16, 2014 @ 5:00pm

**League Begins:** Monday, June 2, 2014 **Complete and return registration form to:** 



## 2014 SUMMER MIDNIGHT BASKETBALL TEAM REGISTRATION FORM

| SPAR Athletics (7401.    | Jewella Ave.) or fax   | at 318-673-7800                 |                          |
|--------------------------|------------------------|---------------------------------|--------------------------|
| TEAM NAME:               |                        |                                 |                          |
|                          | DIVISION:              | GIRLS or                        | BOYS                     |
| AGE CUTOFF               | -                      | 10&Under                        | 16&Under                 |
| June 4 , 2014            | -                      | 12&Under                        | 18&Under                 |
|                          | -                      | 14&Under                        | 24&Under                 |
| HEAD COACH'S NAME:       |                        |                                 |                          |
| HOME ADDRESS:(Street)    |                        |                                 |                          |
| (City)                   |                        | (State)                         | (Zip Code)               |
| C/PHONE:                 | H/PHONE:               |                                 | V/:PHONE:                |
| EMAIL:                   |                        |                                 |                          |
| ASSISTANT COACH'S NAME:_ |                        |                                 |                          |
| HOME ADDRESS:(Street)    |                        |                                 |                          |
| (City)                   |                        | (State)                         | (Zip Code)               |
| C/PHONE:                 | H/PHONE:               | v                               | V/:PHONE:                |
| EMAIL:                   |                        |                                 |                          |
| *ADDITIIONA              | L COACHES LIST ATTACHE | ED FOR ASSISTANT C              | DACHES AND TEAM PARENTS* |
|                          |                        | EST DATES/TI<br>e; Cannot Be Gu |                          |
| BYE DATE/TIME:           |                        | I                               | REASON:                  |
| RYE DATE/TIME:           |                        | 1                               | REASON.                  |

SPAR Athletics: "Building Shreveport Communities, One Game at a Time"